PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | | 10/564,215 | | | | |
|---|--|--|------------------------------------|--------------------------------|--------------------------|---------------------------------------|------------|--------------------|------------------------|----|----------------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
| U.S | . NATIONAL | STAGE FEES | | | | | | RATE | FEE | 1 | RATE | FEE | |
| BASIC FEE | | | | | | | В | ASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | · · · · · · · · · · · · · · · · · · · | 1 | XAM. FEE | | 1 | EXAM. FEE | 200 | |
| SEARCH FEE | | | | | | | s | EARCH FEE | | | SEARCH FEE | 400 | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | 1 | X \$ 125 = | | | X \$ 250 = | 7-5 | |
| TOTAL CHARGEABLE CLAIMS | | | 1 6 minus 20 = | | * | | | X \$ 25 = | | OR | X \$ 50 = | <u> </u> | |
| INDI | EPENDENT CL | AIMS | | minus 3 = | | | | X \$ 100 = | | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | J L. | TOTAL | | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST I | | | | | | | 1 - | SMALL E | | OR | OTHER SMALL E | NTITY . | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | <u>*</u> | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | . (| |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | OTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | | |
| | | (Column 1) | | (Colur | nn 2) | (Column 3) | | | | | | | |
| NDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| AMENDM | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI | | | | CLAIM | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | OTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | , | |
| * ** | If the "Highest No If the "Highest No | umn 1 is less than th umber Previously Pa umber Previously Pa mber Previously Pal | id For" IN THIS id For" IN THIS | SPACE is less | s than '20 s than '3' | 0', enter "20". . enter "3". | d in the a | appropriate box | (in column | | | | |